

TRANSMITTAL FORM

Application Serial Number	10/586,690
Filing Date	July 20, 2006
First Named Inventor	SUGA, Tadamoto
Group Art Unit	1793
Examiner Name	PATEL, Devang R.
Attorney Docket No.	YANE-0003-US1
Patent No.	Not applicable
Issue Date	Not applicable

ENCLOSURES (check all that apply)

- | | | |
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| <input checked="" type="checkbox"/> Fee Transmittal Form
<input type="checkbox"/> Check Attached
<input checked="" type="checkbox"/> Copy of Fee Transmittal Form

<input checked="" type="checkbox"/> Amendment/Response
<input type="checkbox"/> Preliminary
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]

<input type="checkbox"/> Petition for Extension of Time (1/2/3 months)

<input type="checkbox"/> Information Disclosure Statement
<input type="checkbox"/> Form PTO-1449
<input type="checkbox"/> Copies of IDS Citations

<input type="checkbox"/> Certified Copy of Priority Document(s)

<input type="checkbox"/> Sequence Listing submission
<input type="checkbox"/> Paper Copy/CD
<input type="checkbox"/> Computer Readable Copy
<input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)

<input type="checkbox"/> Formal Drawing(s)

<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal

<input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)

<input type="checkbox"/> Terminal Disclaimer

<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application

<input type="checkbox"/> Small Entity Statement

<input type="checkbox"/> CD(s) for large table or computer program

<input type="checkbox"/> Amendment After Allowance | <input type="checkbox"/> Request for Certificate of Correction
<input type="checkbox"/> Certificate of Correction (in duplicate)

<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences

<input type="checkbox"/> Appeal Brief (in triplicate)

<input type="checkbox"/> Status Inquiry

<input type="checkbox"/> Return Receipt Postcard

<input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8

<input type="checkbox"/> Additional Enclosure(s) (please identify below) |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

CORRESPONDENCE ADDRESS

Direct all correspondence to:

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 10363-A Democracy Lane
 Fairfax, VA 22030
 Tel. No.: (703) 591-2664
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 CUSTOMER NO: 22506

SIGNATURE BLOCK

Respectfully submitted,

Date: April 6, 2009
 Reg. No.: 35,205
 Tel. No.: (703) 591-8664
 Fax No.: (703) 591-5907

/Ajay A. Jagtiani, Reg. No. 35,205/
 Ajay A. Jagtiani
 Attorney for the Applicant(s)
 Jagtiani + Gutttag, LLLP
 10363-A Democracy Lane
 Fairfax, VA 22030

FEE TRANSMITTAL

FY 2009

(Effective October 2, 2008)

Complete if Known

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First Named Inventor	SUGA, Tadamoto
Group No.	1793
Examiner Name	PATEL, Devang R.
Confirmation No.	6233

METHOD OF PAYMENT

☒ Payment Enclosed:
☐ Check ☐ Money Order ☒ Other

☒ The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 10-0233
☐ Required Fees (copy of this sheet enclosed).
☒ Additional fee required under 37 CFR 1.16 and 1.17.
☒ Overpayment Credit.

☐ Applicant claims small entity status.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	Filing	Search	Examination	Fee Paid
Utility	330	540	220	
Design	220	100	140	
Plant	220	330	170	
Reissue	330	540	650	
Provisional	220	0	0	

Small Entity Discount

1. TOTAL 0.00

2. EXCESS CLAIM FEES

	Fee	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent.	52	26
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent.	220	110

Total Claims Extra Claims Fee Paid (\$)

50 - 49 = 1 x \$52.00 = \$52.00

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee Paid (\$)
3	- 3 = 0	x \$220.00 = \$0.00

HP = highest number of total claims paid for, if greater than 3

Multiple Dependent Claims	Fee(\$)	Small Entity fee (\$)	Fee Paid (\$)
	390	195	

2. TOTAL: 52.00

3. APPLICATION SIZE FEE

If the specification and drawing exceed 100 sheets of paper, the application size fee due is \$270 (\$135 for small entity) for each additional sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Additional 50 or fraction thereof	Fee (\$)	Fee Paid
		round up to a whole number	x	=
-100=	0	/50=		0.00

3. TOTAL: 0.00

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FEE CALCULATION (continued)

4. ADDITIONAL FEES

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
130	65	Surcharge - late filing fee or oath	
50	25	Surcharge - late provisional filing fee or cover sheet	
130	130	Non-English specification	
2,520	2,520	Request for ex parte re-examination	
130	65	Extension for reply within 1 st mo.	
490	245	Extension for reply within 2 nd mo.	
1,110	555	Extension for reply within 3 rd mo.	
1,730	865	Extension for reply within 4 th mo.	
2,350	1,175	Extension for reply within 5 th mo.	
540	270	Notice of Appeal	
540	270	Filing a brief in support of an appeal	
1,080	540	Request for oral hearing	
400	0	Petitions to the Director	
180	180	Submission of IDS	
810	405	Filing a submission after final rejection (37 CFR 1.129(a))	
810	405	For each additional invention to be examined (37 CFR 1.129(b))	
100	100	Certificate of Correction for applicant's error	
140	70	Submission of Terminal Disclaimer	

Other fee (Specify)

Other fee (Specify)

4. TOTAL: 0.00

TOTAL AMOUNT SUBMITTED

\$52.00

SIGNATURE BLOCK

Respectfully submitted,

Date: April 6, 2009

/Ajay A. Jagtiani, Reg. No. 35,205/

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Ajay A. Jagtiani

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